FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 RECEIVEL FORM D

NOTICE OF SALE OF SECURITIES! 1 PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

OMB Number: 3235-0076 Expires: April 30, 2008

Estimated average burden hours per response 16.00

SEC USI	E ONLY
Prefix	Serial
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06049	

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Broadway Partners Parallel Fund B II, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Sec	tion 4(6) ULOE 06049280
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION	DATA
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Broadway Partners Parallel Fund B II, L.P. (the "Fund")	
Address of Executive Offices (Number and Street, City, State, Zip Code) c/o Corporation Service Company, 2711 Centerville Road, Suite 400, Wilmington, DE 19808	Telephone Number (Including Area Code) (212) 319-7100
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PPOCEOGED
Investments	PROCESSED
Type of Business Organization	F NO 4 2 2 2000
corporation Imited partnership, already formed other (please specify business trust Itimited partnership, to be formed	THOMSON
Month Year	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: 0 3 0 6	■ Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State: D E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



			DENTIFICATION DATA		<u> </u>
2. Enter the information rec					
•		er has been organized within			
					class of equity securities of the issuer;
Each executive offi	icer and director of	corporate issuers and of cor	porate general and managing	partners of partner	rship issuers; and
 Each general and n 	nanaging partner of	partnership issuers.			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	■ General and/or Managing Partner
Full Name (Last name first, if Broadway Partners Fund GP I		l Partner")			
Business or Residence Addres c/o Broadway Real Estate Part	s (Number and Stre tners, LLC, 375 Par	et, City, State, Zip Code) k Avenue, Suite 2107, New	York, NY 10152		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	■ General and/or Managing Partner*
Full Name (Last name first, if Broadway Partners Fund GP I	findividual) I, LLC (the "Genera	al Partner of the General Par	rtner")		
Business or Residence Addres c/o Broadway Real Estate Part	s (Number and Stre tners, LLC, 375 Par	et, City, State, Zip Code) k Avenue, Suite 2107, New	York, NY 10152		
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer**	Director	General and/or Managing Partner
Full Name (Last name first, if Lawlor, Scott J.	`individual)				
Business or Residence Addres c/o Broadway Real Estate Part	s (Number and Stre tners, LLC, 375 Par	et, City, State, Zip Code) k Avenue, Suite 2107, New	York, NY 10152		
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer**	Director	General and/or Managing Partner
Full Name (Last name first, if Yormak, Jonathon K.	findividual)				
Business or Residence Addres c/o Broadway Real Estate Part	s (Number and Stre tners, LLC, 375 Par	et, City, State, Zip Code) k Avenue, Suite 2107, New	York, NY 10152		
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer**	Director	General and/or Managing Partner
Full Name (Last name first, it Lewis, Linda H.	findividual)		1,		
Business or Residence Addres c/o Broadway Real Estate Part			York, NY 10152	····	
Check Box(es) that Apply:	Promoter	Beneficial Owner	■ Executive Officer**	Director	General and/or Managing Partner
Full Name (Last name first, if Semmel, Jason P.	(individual)				
Business or Residence Addres c/o Broadway Real Estate Part			York, NY 10152		
Check Box(es) that Apply:	Promoter	■ Beneficial Owner	Executive Officer	Director	🗒 General and/or Managing Partner
Full Name (Last name first, if Broadway Facility J.V. LLC	(individual)	·			
Business or Residence Addres 125 Jericho Tpke, Suite 300, J		eet, City, State, Zip Code)			
* of the General Partner./ ** of	of the General Partne	er of the General Partner.			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<u> </u>					B. INFO	RMATIO	N ABOUT	OFFERIN	∛G					
													Yes	No
1. Has the	issuer sold,	or does the	issuer inte	nd to sell, t	o non-accre	dited inves	tors in this	offering?						
					wer also in									
2. What is	the minimu	ım investm	ent that will	l be accepte	d from any	individual	?						\$250,000	0*
The General			_											No
		ermit joint												
solicitat registere	tion of purcled with the	on requeste hasers in co SEC and/or ou may set f	nnection w with a stat	ith sales of e or states,	securities in list the nam	n the offering of the bro	ng. If a pers oker or deal	on to be lis	ted is an as:	sociated pe	rson or ager	nt of a brok	eration for er or dealer ed persons of	such a
Full Name (I	ast name fi	irst, if indiv	idual)										·	
BP Direct Sec	curities LLC	2												
Business or R	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	ode)							•••	
375 Park Ave	nue, Suite a	2107, New	York, NY 1	0152										
Name of Asse	ociated Bro	ker or Deal	er -											
States in Whi	ch Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers	,							
(Check	"All States"	or check in	ndividual S	tates)			.,,						□ All Stat	es
(AL)	[AK]	[AZ]	[AR]	[<u>CA</u>]	[<u>CO</u>]	[<u>CT</u>]	[<u>DE</u>]	[<u>DC</u>]	[<u>FL</u>]	[GA]	[HI]	[ID]		
<u>[IL]</u>	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[<u>MD</u>]	[<u>MA</u>]	[<u>MI</u>]	[<u>MN</u>]	[MS]	[MO]		
[MT]	[NE]	[<u>NV</u>]	[NH]	(<u>NJ</u>)	[NM]	[<u>NY</u>]	[<u>NC</u>]	[ND]	[OH]	[<u>OK</u>]	[OR]	(<u>PA</u>)		
[RI] Full Name (L	[<u>SC</u>]	[SD]	[TN]	[TX]	[UT]	[VT]	[<u>VA</u>]	[WA]	[WV]	[WI]	- [WY]	[PR]		
t dii taniic (L	ast name in	131, 11 1110111	uuu,											
Business or R	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)								
Name of Asse	ociated Bro	ker or Deal	er											
States in Whi	ch Person I	isted Has S	Solicited or	Intends to	Solicit Purc	hasers			<u> </u>			u	 	
(Check	"All States'	or check is	ndividual S	tates)									□ All Stat	es
[AL]	[AK]										(HI)			
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full Name (I	Last name t	irst, if indiv	idual)											
Business or R	Residence A	.ddress (Nu	imber and S	Street, City,	State, Zip	Code)								
-														
Name of Ass	ociated Bro	ker or Deal	er											
								<u> </u>						
States in Whi													□ All Cene	ac
`		or check i									,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	[75]	□ All Stat	C 2
[AL]	[AK]	[AZ]	(AR)	[CA]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
(IL] [MT]	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\perp\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity	\$0	\$0
	□ Common □ Preferred		
	Convertible Securities (including warrants)	\$ 0	
	Partnership Interests	\$600,000,000*	\$13,800,000
	Other (Specify)	\$0	\$ 0
	Total	\$600,000,000	
	* Aggregate capital commitments of the Fund and certain affiliated funds. Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	45	\$13,800,000
	Non-accredited Investors	0	\$0
	Total (for filings under Rule 504 only)		_ s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
		Type of Security	Dollar Amount Sold
	Type of offering		_ \$
	Rule 505		
	Regulation A		<u></u>
	Rule 504	-	<u> </u>
	Total	 	<u> </u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		s *
	Printing and Engraving Costs		■ S*
	Legal Fees		■ \$*
	Accounting Fees		■ S*

Total

\$1,000,000*

^{*} The Fund will bear on a pro-rata basis with affiliated funds all legal and other expenses incurred (other than any placement fees) in the formation of the funds and the offering of interests in the funds up to an amount not to exceed \$1,000,000. Organizational expenses in excess of this amount and any placement fees will be paid by the funds but borne by the manager through a 100% offset against the management fee. In addition the funds will bear on a pro-rate basis any organizational expenses attributable to the formation of any subsidiary REIT.

	C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES AND USE	OF PROCEE	DS			
b.	Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."						
5.	Indicate below the amount of the adjusted gross proceeds to the issuer amount for any purpose is not known, furnish an estimate and check the must equal the adjusted gross proceeds to the issuer set forth in response	the box to the left of the estimate. The total of the payments listed					
			Paymen Office Director Affilia	rs, s, &	Payments To Others		
	Salaries and fees		\$8,789,00	00*	□\$		
	Purchase of real estate		o\$		□\$		
	Purchase, rental or leasing and installation of machinery and equipr	ment			ū\$		
	Construction or leasing of plant buildings and facilities		0\$		O\$		
	Acquisition of other businesses (including the value of securities in used in exchange for the assets or securities of another issuer pursuant			□\$			
	Repayment of indebtedness			□\$			
	Working capital	□\$		□\$			
	Other (specify): Investments	□\$		\$590,211,000			
			□\$		os		
	Column Totals		. \$8,789,000		\$590,211,000		
Total Payments Listed (columns totals added)				. ■\$599,000,000			
	D EE	DERAL SIGNATURE					
an	e issuer has duly caused this notice to be signed by the undersigned duly undertaking by the issuer to furnish to the U.S. Securities and Exchange n-accredited investor pursuant to paragraph (b)(2) of Rule 502.	authorized person. If this notice is filed	under Rule 505 staff, the infor	, the followir mation furnis	ng signature constitutes hed by the issuer to any		
Iss	uer (Print or Type)	Signature	D	ate	0 0006		
Br	padway Partners Parallel Fund B II, L.P.			Novem	ber 8, 2006		
Name of Signer (Print or Type) Linda H. Lewis		Title of Signer (Print or Type)					
		Chief Financial Officer of Broadway Pa Broadway Partners Fund GP II, L.F Fund B II, L.P.					

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

^{*} Estimate of (i) aggregate twelve months' management fee of the Fund and affiliated funds assuming capital commitments in the amount of the Aggregate Offering Price and (ii) investor service fee assuming capital commitments in the amount of the Fund's Aggregate Dollar Amount of Purchases shown on page 4, and drawing of 50% or more of the capital commitments of the Fund.